

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWA!! STATE ETHICS COMMISSIO:

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

	(Type of the			
PART I LOBBYIST				
NAME (Last)	(First)	(Middle)	TELEPHONE	
Adams	Robert	Р	703/934-1212	
MAILING ADDRESS (Street)			FAX	
3871 Plaza Drive			703/934-1211	
(City)	(State)	(2	(Zip Code)	
Fairfax	VA	2	22030	
EMPLOYING ORGANIZATION (Fill in only if you	are employed by a business entity wi	hich has been retained to lobby)	TELEPHONE	
MAILING ADDRESS (Street)			FAX	
(City)	(State)	(2	Zip Code)	

PART II ORGANIZATIO	N		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
Alliance for Marriage Fo	703/934-1212		
MAILING ADDRESS (Street)		FAX	
3871 Plaza Drive		703/934-1211	
(City)	(State)	(Zip Code)	
Fairfax	VA	22030	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
Matt Daniels, President, Alliance for Marriage		703/934-1212	
MAILING ADDRESS (Street)		FAX	
3871 Plaza Drive		703/934-1211	
(City)	(State)	(Zip Code)	
Fairfax	VA	22030	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
☐ Agriculture	Education	☐ Human Services	Science, Technology & Economic Development			
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	☐ Tourism & Recreation			
Consumer Protection & Commerce	Hawaiian Affairs	☐ Labor & Employment	☐ Transportation			
Culture, Arts, Historic Preservation	Health	Planning, Land & WaterUse Management	Other: (indicate below)			
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections	marriage laws			
PART IV CERTIFICATION	N OF LOBBYIST					
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete. 3 13 07 (Signature of Lobbyist) (Date)						
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PART V AUTHORIZATION	ON TO LOBBY					
NAME		TITLE OF AUTHORIZING OFFICE	R OR PERSON REPRESENTED			
Matt Daniels		President				
NAME OF ORGANIZATION (if applicable)			TELEPHONE			
Alliance for Marriage Fou	703/934-1212					
MAILING ADDRESS (Street)			FAX			
3871 Plaza Drive			703/934-1211			
(City)	(State)		(Zip Code)			
Fairfax	VA	,	22030			
I hereby authorize the above - named person to engage in lobbying activities on behalf of the unders igned.						
(Signature of Authorizing Officer or Person Represented)			(Date)			